



Buckinghamshire, Oxfordshire
and Berkshire West
Integrated Care Board

Matt Burns
Principal Planner
Directorate for Economic Growth and Neighbourhood Services
Reading Borough Council

Unipart House
Oxford
OX4 2PG

10 February 2025

Dear Matt,

PL/22/1916 & PL/22/1917 - Mixed use development comprising demolition of existing buildings and erection of new building comprising up to 218no. build-to-rent residential dwellings (Class C3) & up to 3,046 sqm commercial floorspace comprising cinema (Sui Generis) and ground floor commercial uses within Use Class E and/or Bar (Sui Generis Use). Associate public realm and infrastructure works (amended description) (accompanied by an Environmental Statement)

Thanks for consulting the NHS Buckinghamshire, Oxfordshire & West Berkshire Integrated Care Board (ICB). Integrated Care Board is a statutory NHS organisation, which was established on 1 July 2022 by The Integrated Care Boards (Establishment) Order 2022 and has the delegated function of commissioning of primary care services including GPs. The ICB formally replaced the former Berkshire West Clinical Commissioning Group (CCG) on 1 July 2022 and carries on all CCG functions as far as they relate to primary care and its estates.

Primary healthcare estates including GP premises are funded through reimbursement of rents and business rates by the ICB based on the existing population data. The rent will then be assessed by the District Valuer, given that the ICB will reimburse that rent. As a primary care commissioner, the ICB therefore has a responsibility to ensure that any primary care provision is financially affordable and operationally viable.

Funding towards primary care estates

The ICB has no dedicated funding for any primary care estates development in their annual budgets. The ICB notes that the applicant's planning statement refers to Community Infrastructure Levy (CIL) and it can go towards health provision. Reading Borough Council (the Council) has implemented Community Infrastructure Levy (CIL) charging but the ICB would like to point out that there are currently no CIL contribution towards primary care and the Council has no plan to allocate CIL towards primary care. **Given that there are no CIL contributions towards healthcare, any necessary mitigation to avoid an unacceptable impact on primary healthcare would need to be secured by a Section 106 agreement.** Any financial contribution to be secured in this planning application will go towards capital costs of primary healthcare provision resulting from an increase in population and additional demand on healthcare facilities.

Proposed development

From the updated planning statement dated March 2024, it is understood that the proposed development will be delivered across two sites, which is known as Yield Hall Phase 1 and Phase 2 and will deliver a total of 436 new residential units, including 218 units at Yield Hall Phase 1 site and another 218 units at Phase 2 sites.

Local GP Capacity and Primary Care Mitigation

While there is no national guidance in setting out the capacity of a GP practice, NHS England widely accepts “size and space standards”, which set out the appropriate size of GP premises (gross internal area (GIA), square metres) in relation to the number of patients to be accommodated at the premises. The table above clearly shows that both Practices are already over-capacity and would not have sufficient clinical capacity to accommodate any new patients from the appeal site. .

The site is in Central Reading, and it is within the catchment areas of a number of Practices. The following table sets out the number of registered patients and the current gross internal area of both Practices:

PCN	Practice	Registered Patients	Gross Internal Area (GIA) (sqm)	GIA standard (sqm)	GIA surplus / deficit
Reading Holybrook	Reading Walk-in Centre	14,271	709.58	1,083	deficit
Reading Central	London Street Surgery	5,753	236.9	500	deficit
Reading Central	Pembroke Surgery	6,193	509.6	667	deficit
New Reading	Melrose Surgery	14,695	494.3	1,083	deficit

While there is no national guidance in setting out the capacity of a GP practice, NHS England size and space standards set out the size of GP premises in GIA in relation to the number of patients to be accommodated at the premises. This standard is in line with the NHS Property Services Demand Assessment Tool. **The table above implies that none of the GP Practices in the local area would have the capacity to accommodate new patients generated from the proposed development.**

The ICB has also carried out a capacity assessment for Reading Walk-in Health Centre. The findings of the study also support the ICB’s assessment that the Reading Walk-in Health Centre is over-capacity. Therefore, the GP has no capacity to accommodate any new patients generated from the proposed development.

The ICB is currently working internally to provide a long-term solution to provide extra clinical capacity in Central Reading, including the potential to deliver a new healthcare provision in Central Reading. The requested financial contribution would go towards that new provision. It bears emphasis that this is a specific, identified and costed project. The ICB has a standard formula to work out the amount of financial contribution based on the projected population increase as below. This formula is adopted by the former Oxfordshire Clinical Commissioning Group (OCCG), which is now part of the ICB, as advised by NHS Property Services in 2017 including the formula and the £360 multiplier:

Proposed number of dwellings (A) Projected average population per dwelling (B) = 2.4 (ONS Average occupancy rate) Patient Yield (C) = (A) x (B)

Multiplier (D) = £360 Contribution sought = (C) x (D)
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The ICB would request a financial contribution towards primary care in this planning application so that the funding would help financially support any long-term solution identified by the ICB. In this planning application, the ICB would request a financial contribution of **£376,704** towards primary care. The contribution request is directly related to the quantum of the proposed development. The contribution will go towards the ICB's funding pot in Central Reading so it would co-fund an identified primary care estates development in the Central Reading to serve the new population. The ICB would request the contribution should be index-linked.

Currently, none of the Practices in the local area would have the capacity to accommodate any new patients from the proposed development. Therefore, the requested contribution is necessary to make the development acceptable in planning terms and is directly related to the development. Furthermore, the financial contribution is calculated based on projected population increase of the proposed development. Therefore, it is fairly and reasonably related in scale and kind to the development. The financial contribution fully complies with Section 122 of the Community Infrastructure Levy Regulations 2010 (as amended).

In an absence of an appropriate healthcare mitigation to be secured in this planning application, the ICB would like to raise **OBJECTION** to the proposed development in this regard.

Summary and Conclusion

Thanks again for consulting the ICB in this planning application. Please do not hesitate to contact me if you have any questions about this letter.

Yours sincerely,

Jeffrey Ng MRTPI

Primary Care Lead – Estates

NHS Buckinghamshire, Oxfordshire & West Berkshire Integrated Care Board



RTPI
Chartered Town Planner

